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APPLICANTS

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** CONTINUING DATA *****

No/ HS

** FOREIGN APPLICATIONS *****

No/ HS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/22/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	CANADA	5	25	2
Examiner's Signature	Initials			

ADDRESS

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TITLE

Single finger or thumb method for text entry via a keypad

FILING FEE RECEIVED 1318	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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